

DEC 19 2005

Facsimile Transmittal

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To: Group 3731, USPTO**Telephone:****Fax:** 571 273-8300**From:** Paul Davis**Telephone:** 650-324-7041**Direct Fax:** 650-324-0638**No. of Pages:** 10 (including cover)**Date:**

42749-0012 (APR 2005) 4983

Message:

Application Number	10/651,852
Filing Date	08/29/2003
First Named Inventor	Cartledge
Group/Art Unit	3731
Examiner Name	Not assigned
Attorney Docket Number	42749-0012

1. Transmittal Form
2. Fee Transmittal Form
3. Preliminary Amendment

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PTO/SB/21 (6-99)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/651,852
		Filing Date	08/29/2003
		First Named Inventor	Cartledge
		Group/Art Unit	3731
		Examiner Name	
Total Number of Pages in This Submission	9	Attorney Docket Number	42749-0012

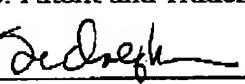
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> Exhibits <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Status Claimed <input type="checkbox"/> Statement under 3.73(b)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; padding: 5px; height: 40px; margin-top: 5px;"></div>
Remarks		
AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT 08-1641 FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER.		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	Paul Davis, Reg. No. 29,294, HELLER EHRMAN WHITE & McAULIFFE LLP		
Signature			
Date	12/19/05	Customer Number:	25213

I hereby certify that this correspondence is being transmitted to the U.S. Patent and Trademark Office via facsimile on Dec 19, 2005

Sidney Manibusan 

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

COMBINED FEE TRANSMITTAL for FY 2005

Effective 12/08/2004. Patent fees are subject to annual revision.

PTO/SB/17 (12-04) (Revised) (For payment of 37 CFR 1.17 fees including (f), (g), (h), & (i))

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 25)

Complete if Known

Application Number	10/651,852	RECEIVED
Filing Date	08/29/2003	CENTRAL FAX CENTER
First Named Inventor	Cartledge	DEC 19 2005
Examiner Name		
Art Unit	3731	
Attorney Docket No.	42749-0012	

METHOD OF PAYMENT (check one)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account				

Deposit Account Number: 08-1641

Deposit Account Name: Heller Ehrman LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below

Credit any overpayments and charge any deficiencies

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the deposit account

FEE CALCULATION (continued)

4. PETITION FEES UNDER 37 CFR 1.17 (i)		Fee Paid
Fee Code: 1462	Fee \$ 400	For petitions filed under: § 1.53(c); § 1.57(a); § 1.182; § 1.183; § 1.378(e); § 1.741(b)

5. PETITION FEES UNDER 37 CFR 1.17 (i)		Fee Paid
Fee Code: 1463	Fee \$ 200	For petitions filed under: § 1.12; § 1.14; § 1.47; § 1.59; § 1.103(a); § 1.136(b); § 1.295; § 1.377; § 1.550(c); § 1.956; § 5.12; § 5.15; § 5.25

6. PETITION FEES UNDER 37 CFR 1.17 (i)		Fee Paid
Fee Code: 1464	Fee \$ 130	For petitions filed under: § 1.19(g); § 1.84; § 1.91; § 1.102(d); § 1.138(e); § 1.313; § 1.314

7. PROCESSING FEES UNDER 37 CFR 1.17 (i)		Fee Paid
Fee Code: 1808 (1803 for § 1.221)	Fee \$ 130	For petitions filed under: § 1.28(c)(3); § 1.41; § 1.48; § 1.52(d); § 1.53(b)(3); § 1.55; § 1.99(e); § 1.103(b); § 1.103(c); § 1.103(d); § 1.217; § 1.221; § 1.291(c)(5); § 1.497(d); § 3.81

8. OTHER FEES

Entity Fee (\$)	Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	2,520
Design	200	100	100	50	135	65	920*
Plant	200	100	300	150	160	80	1,840*
Reissue	300	150	500	250	600	300	120
Provisional	200	100	0	0	0	0	450
SUBTOTAL (1)						\$ 0	1,020

2. EXTRA CLAIM FEES

Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
50	25	Each claim in excess of 20 or, for Reissues, each claim in excess of 20 and more than in the original patent	500
200	100	Each independent claim in excess of 3 or, for Reissues, each independent claim more than in the original patent	790
360	180	Multiple dependent claim, if not already paid	1,510

	Extra Claims	Fee from above	Fee Paid
Total Claims	21	-20** = 1 x 25 = 25	= 25
Independent Claims	1	-3** = 1 x 0 = 0	= 0
Multiple Dependent			= 0
SUBTOTAL (2)			\$ 25

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof (round up to the next whole number). See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50	Fee (\$)	Small Entity Fee (\$)	SUBTOTAL (4+5+6+7+8)	\$ 25
-100 =	/50 =		x 250	OR	x 125	

* Reduced by Basic Filing Fee Paid

SUBMITTED BY		Complete if applicable
Name	Paul Davis	Registration No. (Attorney/Agent)

PAGE 3/10 * RCVD AT 12/19/2005 9:06:22 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/24 * DNIS:2738300 * CSID:650 324 0638 * DURATION (mm:ss):03:50

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DEC 19 2005

Practitioner's Docket No. 42749-0012

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

In re application of: Cartlego

Serial No.: 10/651,852

Filed: 08/29/2003

For: Apparatus for implanting surgical devices for controlling the internal circumference of an anatomic orifice or lumen

Group No.: 3731

Examiner: Unassigned

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Introductory Comments

Please consider the following amendments and remarks.

Amendments to the Specification begins on page 2.

Claims listing begins on page 3.

Remarks begin on page 7.

12/21/2005 EFLORES 00000075 081641 10651852

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Attorney Docket No.: 42749-0012
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AMENDMENT OR RESPONSE TO OFFICE ACTION - PAGE 1 -

PAGE 4/10 * RCVD AT 12/19/2005 9:06:22 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/24 * DNIS:2738300 * CSID:650 324 0638 * DURATION (mm:ss):03:50